EC 1972 (6-02)

respond unless the form displays a currently valid OMB control number.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549
FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB Number	3235-0076
Expires:	May 31, 2005
Estimated avera	ge burden
hours per respon	ise 1

OMB APPROVAL

SEC U	SE ONLY
Prefix	Serial
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DATE F	RECEIVED
DATE	RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate changed	e.)
Shares of Preferred Stock	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506	Section 4(6) ULOE
Type of Filing: ☑ New Filing ☐ Amendment	
A. BASIC IDENTIFICATION DATA	
1.Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) EnLink Geoenergy Services, Inc.	04037262
Address of Executive Offices (Number and Street, City, State, Zip Code) 16430 Park Ten Place, Suite 600, Houston, Texas 77084	Telephone Number (Including Area Code) 281-398-6880
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code) Same
Brief Description of Business:	PROCESSED
Sale and Installation of HVAC products	PROCESSED
Type of Business Organization	JUL 14 2004 —
☑ corporation ☐ limited partnership, already formed ☐ other (please specific places of the corporation ☐ other (please specific places)	
business trust limited partnership, to be formed	THOMSON
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: US. Postal Service abbreviation for State: DE CN for Canada; FN for other foreign jurisdiction)	FINANCIAL Estimated

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Requested: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

 Enter the information requested for the following Each promoter of the issuer, if the issuer ha Each beneficial owner having the power to Each executive officer and director of corpo Each general and managing partner of partner 	s been organized within the vote or dispose, or direct the orate issuers and of corporate	vote or disposition of, 10% or		
Check Box(es) that Apply: Promoter	Beneficial Owner	☑ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Head, George V.				
Business or Residence Address (Num 16430 Park Ten Place, Suite 600, Houston, Texas 7	iber and Street, City, Stat 7084	te, Zip Code)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Dale, Richard C.				
Business or Residence Address (Num 16430 Park Ten Place, Suite 600, Houston, T	ber and Street, City, State exas 77084	te, Zip Code)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Hojel, Richard				
Business or Residence Address (Num 12112 Technology Blvd., Suite 100, Austin,	ber and Street, City, Stat Texas 78727	e, Zip Code)		
Check Box(es) that Apply:	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Martin, John				
Business or Residence Address (Num 16430 Park Ten Place, Suite 600, Houston, T	ber and Street, City, Stat Yexas 77084	re, Zip Code)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Smalling, Anne				
Business or Residence Address (Num 12112 Technology Blvd., Suite 100, Austin,	ber and Street, City, Stat Texas 78727	e, Zip Code)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Tuttle, Philip				
Business or Residence Address (Num 8 Greenway Plaza, Suite 1320, Houston, Tex	ber and Street, City, Stat as 77046	e, Zip Code)		
Check Box(es) that Apply:	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Num	ber and Street, City, Stat	e, Zip Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Num	ber and Street, City, Stat	e, Zip Code)		
Check Box(es) that Apply:	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Num	ber and Street, City, Stat	e, Zip Code)		
HER TOTAL CONTRACTOR OF THE CO				

A. BASIC IDENTIFICATION DATA

4 × 52				В	. INFORM	ATION ABO	OUT OFFER	RING				
1. Has th			ne issuer inte n Appendix			dited investo der ULOE.	ors in this of	fering?			YES	NO ☑
2. What	is the minin	num investn	nent that wil	l be accepte	d from any i	individual? S	\$500,000		**************			
2 Door	tha affaring	namit lain	t aumarahin	of a cinalou	mit?						YES	NO
			_								LJ	Ø
or si is ar brol	imilar remui n associated ker or dealer	neration for person or a	solicitation gent of a bro	of purchase oker or deale persons to be	rs in connec er registered	or will be pai tion with sal with the SE associated pe	es of securit C and/or wi	ties in the of th a state or	fering. If a states, list the	person to be ne name of t	listed he	
Full Nan	ne (Last nam	ne first, if in	dividual)									
Non	ie.			·								
Business	or Residen	ce Address (Number and	Street, City	y, State, Zip	Code)						
Name of	Associated	Broker or D	ealer									
States in	Which Pers	on Listed H	as Solicited	or Intends t	o Solicit Pu	rchasers						
(Ch	eck "All Sta	tes" or chec	k individual	States			•••••	••••••			🔲 All Sta	tes
[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
[RI] Full Nam	[SC]	[SD] ne first, if in	(TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Business	or Residen	ce Address (Number and	I Street, City	y, State, Zip	Code)						
Name of	Associated	Broker or D	ealer					-	- 1			
States in (Ch	Which Pers eck "All Sta	on Listed H tes" or chec	as Solicited k individual	or Intends t States	o Solicit Pu	rchasers					🔲 All Sta	tes
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nan	ne (Last nam	ne first, if in	dividual)									
Business	or Residen	ce Address (Number and	l Street, City	y, State, Zip	Code)						
Name of	Associated	Broker or D	ealer									
			as Solicited k individual			rchasers	**************	••••••••			🗌 All Sta	tes
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$ 4,000,000	\$_2,000,000
	☐ Common ☑ Preferred		
	Convertible Securities (including warrants)	\$ 4,000,000	\$_2,000,000
	Partnership Interests	\$	\$
	Other (Specify N/A)	\$	\$
	Total	\$ 4,000,000	\$_2,000,000
	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in		
2.	this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Accredited Investors	Number Investors	Aggregate Dollar Amount Of Purchases \$ 2,000,000
	Activated Investors		\$ <u>2,000,000</u>
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		\$
An 3.	swer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$
	Regulation A	N/A	\$
	Rule 504	N/A	\$
	Total	N/A	\$
iss	a. Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of the uer. The information may be given as subject to future contingencies. If the amount of an penditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$0
	Legal Fees.	\boxtimes	\$_15,000
	Accounting Fees		\$0
	Engineering Fees		<u> </u>
	Sales Commissions (specify finders' fees separately)		\$0
	Other Expenses (identify)		\$0
	Total	\boxtimes	\$_15,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Question 1 and total expenses f	urnished in response to Part C - Question 4.a. This		
_		s proceeds to the issuer."		\$3,985,000
5.	be used for each of the purposes furnish an estimate and check the	the adjusted gross proceeds to the issuer used or proposed to s shown. If the amount for any purpose is not known, the box to the left of the estimate. The total of the payments proceeds to the issuer set forth in response to Part C -		
			Payments to Officers.	
			Directors, & Affiliates	Payments To Others
	Salaries and fees			S None
	Purchase of real estate		S None ■ S None	S None None
	Purchase, rental or leasing and	installation of machinery and equipment		
	Construction or leasing of plant	buildings and facilities	S None	⊠\$ None
	this offering that may be used in	ncluding the value of securities involved in nexchange for the assets or securities of another		⊠ \$ None
	Repayment of indebtedness		S None	S None
	Working capital		∑ \$ 3,985,000	⊠ \$ <u>None</u>
	Other (specify)			S None None
	Column Totals		S None	S None None
	Total Payments Listed (column	totals added)	⊠ \$ <u>.3</u>	985,000
	Control of the Contro	D. FEDERAL SIGNATURE		Band of the second seco
signa infor Issue	ature constitutes an undertaking by	to be signed by the undersigned duly authorized person. If the issuer to furnish to the U.S. Securities and Exchange Common conversities investor pursuant to paragraph (b)(2) of R. Signature	mmission, upon written ule 502.	request of its staff, the
	ē of Signer (Print or Type)	Title of Signer (Print or Type)	1-1-1	
Nam		31		
	rge V. Head	President		and the second second

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE						
1.	Is any party described in 17 CFR	R 230.262 presently subject to any of the disqualification provisions of such rule? Yes No						
		See Appendix, Column 5, for state response.						
2.	The undersigned issuer hereby a 239.500) at such times as required	undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D ired by state law.	(17 CFR					
3	The undersigned issuer hereby t	undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to	offerees.					
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.							
	issuer has read this notification and norized person.	nd knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersign	ned duly					
	er (Print or Type) Link Geoenergy Services, Inc.	Signature Date Duly 1, 2004						
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)						
Geo	orge V. Head	President	-					

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

5. 1 Type of security and aggregate offering price offered in state Disqualification under Type of investor and amount purchased in State (Part C-Item-2)-State ULOE (if yes, attach explanation of Intend to sell to (Part C - Item 1 non-accredited waiver granted) (Part investors in State E- Item 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited Investors Investors Amount Amount Yes No State Yes No ALΑK AZAR $\mathsf{C}\mathsf{A}$ CO CT DE DC FL GA HI ID IL. IN IΑ KS ΚY LA ME MD MAMI MNMSMO

AFFENDIA

ALLEMDIA

	2		3	4 5.							
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C - Item 1		Type of and amount pu	investor rchased in State -Item 2)		Disqualific State UL attach exp waiver gra	cation under OE (if yes, clanation of anted) (Part em 1)		
				Number of Accredited		Number of Non- Accredited					
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No		
MT									-		
NE				<u></u>							
NH											
NJ											
NM											
NY		1	Series B Preferred Stock - \$1,000,000	1	\$500,000	0	\$0		No		
NC							1.1				
ND											
ОН											
ОК											
OR											
PA											
RI		†									
- SC											
SD								<u>-</u>			
TN											
TX		1	Series B Preferred Stock - \$3,000,000	2	\$1,500,000	0	\$0		No		
UT											
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WA			•								
WV									-		
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